



Roxann D. Wedegartner
Mayor

City of
GREENFIELD, MASSACHUSETTS

Department of Inspections and Enforcement

Mark A. Snow
Inspector of Buildings

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CONSTRUCTION CONTROL WAIVER FORM:

(Applies to buildings containing over 35,000 cubic feet)

Addition: ☐

Existing Building: ☐

Occupancy Use group: _____

Scope of Work: _____

DOES WORK REQUIRE MODIFICATIONS TO THE FOLLOWING SYSTEMS OR AFFECT A SYSTEMS PERFORMANCE:

| | | | |
|--------------------------|------------------------------|-----------------------------|------------------------------|
| Structural: | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Means of Egress: | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Fire Protection Systems: | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Ventilation: | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Mechanical Systems: | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Accessibility: | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Energy: | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |

Site Visit by Inspector Prior to work: Yes ☐ No ☐ N/A ☐

If yes, Inspectors signature: _____ Date: _____

Construction Control requirement Waived: Yes ☐ No ☐ N/A ☐

Requesting Applicants Signature: _____ Date: _____